

E C	intiff(s)/Petitioner(s)
VS.	CIVIL ACTION NO. 2:05cv 957.
	(To be supplied by Clerk of Court)
4	
_ <u></u>	ndant(s)/Respondent(s)
Defe	endant(s)/Respondent(s)
	· · · · · · · · · · · · · · · · · · ·
	MOTION TO PROCEED WITHOUT PREPAYMENT OF FEES
give s myse	I, Edgie Ray Ames Jr., a United States citizen, make this Motion to eed Without Prepayment of Fees pursuant to Title 28 U.S.C. § 1915 in order to eed in forma pauperis in this action. I am unable to make prepayment of fees or to security therefor, and it is my belief that I am entitled to redress. I have not divested if of any property, monies or any items of value for the purpose of avoiding payment id fees.
I. of part	BRIEF STATEMENT AS TO THE NATURE OF THE ACTION: Violation The Interstate agreement on Detainers Act, 15-9-81. It time toll 188 days.
п.	RESIDENCE: Your address: Jountain Correctional Jacility
	Atmore, Al 36503
	(City) (State) (Zip Code)
ш.	MARITAL STATUS: 1. Single Married Separated Divorced 2. If married, spouse's full name:
IV.	DEPENDENTS: 1. Number: 2. Relationship to dependent(s): 3. How much money do you contribute toward your dependents' support on a monthly basis? \$

Revised 12/14/01

EMPLOYMENT:		
Name of employer: a. Address of employer:		
a. Address of employer:		
	(Street)	
(City) (State	e)	(Zip Code)
b. How long have you been employed	by present e	employer?
Years: Mont	hs	
c. Income: Monthly \$	or Week	y \$
d. What is your job title?		
2. If unemployed, date of last employmen	ıt:	
Amount of salary and wages received	per month in	last employment: \$
3. Is spouse employed? If se	o, name of e	nployer:
a. Income: Monthly \$		
b. What is spouse's job title?	or week	y 3
NANCIAL STATUS	÷	kly \$
NANCIAL STATUS 1. Owner of real property (excluding ord a. Description: b. Full Address: c. In whose name: d. Estimated value e. Total amount owed	inary housel	oold furnishings and
NANCIAL STATUS 1. Owner of real property (excluding ord a. Description: b. Full Address: c. In whose name: d. Estimated value e. Total amount owed	inary housel	oold furnishings and
NANCIAL STATUS 1. Owner of real property (excluding ord a. Description: b. Full Address: c. In whose name: d. Estimated value e. Total amount owed Owed to:	inary housel	oold furnishings and \$ \$
NANCIAL STATUS 1. Owner of real property (excluding ord a. Description: b. Full Address: c. In whose name: d. Estimated value e. Total amount owed Owed to:	inary housel	old furnishings and \$ \$ \$ \$
NANCIAL STATUS 1. Owner of real property (excluding ord a. Description: b. Full Address: c. In whose name: d. Estimated value e. Total amount owed Owed to:	inary housel	old furnishings and \$ \$ \$ \$
NANCIAL STATUS 1. Owner of real property (excluding ord a. Description: b. Full Address: c. In whose name: d. Estimated valuee. Total amount owed Owed to: f. Annual income from property C. Other assets/property, such as automob judgments, etc. (If more than two, list i a. Make & Model: In whose name registered? Present Value of Asset: Amount owed:	inary housel	nold furnishings and \$
NANCIAL STATUS 1. Owner of real property (excluding ord a. Description: b. Full Address: c. In whose name: d. Estimated valuee. Total amount owed Owed to: f. Annual income from property d. Other assets/property, such as automob judgments, etc. (If more than two, list in a. Make & Model: In whose name registered? Present Value of Asset:	oiles, boats, r	nold furnishings and \$

	financial institutions,	other repositories, or anyw	here else - \$O			
	institutions, or other so	y you during the last twelve loan associations, prisoner ources as indicated below:	accounts, other financial			
	Business, profession or	other forms of self-employ	ment - \$ <u>400.55</u>			
	Rent payments, interest or dividends \$					
	Pensions, annuities or l					
			· · · · · · · · · · · · · · · · · · ·			
		M				
	Any other courses	enefits or social security be	nefits \$			
	Any other sources		\$			
3.	Obligations: a. Monthly rental on hous	e or apartment	· \$			
	b. Monthly mortgage pays	ments on house	\$			
4.	Other information pertines	nt to your financial debts a	nd obligations:			
	(Creditor)	(Total debt)	(Monthly payment)			
	(Creditor)	(Total debt)	(Monthly payment)			
	(Creditor)	(Total debt)	(Monthly payment)			
5.	If you have indicated that y	Ou have minimal or no ass	ets or income places			
	plain how you provide for y					
sh e	elter. (e.g. food stamps, fam	uly assistance or charitable	contributions.)			
Otl	ier (Explain): My fan	sily bends me me	ney			
		•				

VII. ALL PLAINTIFFS/PETITIONERS MUST READ AND SIGN:

I UNDERSTAND that any false statement(s) of a material fact contained herein may serve as the basis of prosecution and conviction for perjury or making false statements. FURTHER, I CERTIFY that all questions contained herein have been answered and are true and correct to the best of my knowledge and belief.

SIGNATURE OF PRAINTIFF/PERITIONER

Page 4 of 6

Address al 36503

VIII. FOR PRISONER PLAINTIFFS/PETITIONERS ONLY:

A financial statement containing all transactions in your prisoner account for the six (6) months immediately preceding the filing of the Complaint <u>must</u> accompany this Motion. The financial statement must be in the form of a computer printout or bank ledger card prepared by the institution; a notarized financial statement that you prepare; or a financial statement prepared by an authorized officer of the institution. Failure to provide this financial statement information may result in the dismissal of this action.

The requirement to submit the financial statement addressed above does not negate your responsibility to ensure that the Certificate found below is also properly executed and filed.

I hereby authorize the agency having custody of me to collect from my prison account and forward to the Clerk of the United States District Court payments in accordance with 28 U.S.C. § 1915(b)(2). I understand that even if I am allowed to proceed in forma pauperis or pay a partial filing fee and even if my case is later dismissed for any reason, I am obligated to pay to the Clerk of the Court the full amount of the filing fee (\$150.00 for a civil action, \$5.00 for a habeas corpus petition, or \$105.00 for an appeal).

7-5-05	Eddi Lay James &
DATE	SIGNATURE OF PLAINTIFF/PETITIONER

CERTIFICATE
(To be completed by the institution of incarceration)

I certify that the appli	cant named herein has the sum of \$O on account to
his/her credit at Jounfa	(name of institution). I further certify that
	e applicant's average monthly balance was \$ I
further certify that during the	e past six months the average of monthly deposits to the
applicant's account was \$	(Please attach a certified copy of the applicant's
account statement showing tr	ansactions for the past six months.)
Vidos V. Hari	
DATE	SIGNATURE OF AUTHORIZED OFFICER

r

STATE OF ALABAMA DEPARTMENT OF CORRECTIONS FOUNTAIN CORRECTIONAL CENTER

AIS #: 186013 NAME: JAMES, EDDIE RAY JR

AS OF: 07/12/2005

	MONTH	# OF DAYS	AVG DAILY BALANCE	MONTHLY DEPOSITS
	JUL	19	\$0.00	\$0.00
	AUG	31	\$0.00	\$0.00
	SEP	30	\$0.00	\$0.00
	OCT	31	\$0.00	\$0.00
	NOV	30	\$0.00	\$0.00
	DEC	31	\$0.00	\$0.00
	JAN	31	\$0.00	\$0.00
	FEB	28	\$0.00	\$0.00
	MAR	31	\$2.74	\$95.29
	APR	30	\$7.82	\$90.00
	MAY	31	\$2.74	\$40.00
	JUN	30	\$13.17	\$140.00
	JUL	12	\$0.90	\$0.00
Average	12 month ba	lance	\$2.28	\$30.44

STATE OF ALABAMA, ESCAMBIA COUNTY, SWORN TO AND SUBSCRIBED BEFORE ME THIS 12th DAY OF JULY, 2005.

My Commission Expires Oct. 25, 2008

Satrick Me Kay Notary Public